

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Pat Murphy for Iowa

A. Full Name (Last, First, Middle Initial) Thomas D McGee			Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 2115 Northcrest Dr			Transaction ID : VN8F9CQT8C2	
City	State	Zip Code		
Ames	IA	50010-5107		
FEC ID number of contributing federal political committee.		C		
Name of Employer Iowa State University		Occupation Retired Professor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 800.00		
			Amount of Each Receipt this Period 250.00	

B. Full Name (Last, First, Middle Initial) Kerry Cahill McGrath			Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address 3914 72nd St			Transaction ID : VN8F9CRBM14	
City	State	Zip Code		
Urbandale	IA	50322-2602		
FEC ID number of contributing federal political committee.		C		
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
			Amount of Each Receipt this Period 100.00	

C. Full Name (Last, First, Middle Initial) Andy H McGuire			Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 100 37th St			Transaction ID : VN8F9CR2326	
City	State	Zip Code		
Des Moines	IA	50312-4304		
FEC ID number of contributing federal political committee.		C		
Name of Employer Meridian Health Plan		Occupation President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
			Amount of Each Receipt this Period 250.00	

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	